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BIBDATASHEET**CONFIRMATION NO. 2936**

Bib Data Sheet

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|---|---|----------------------------|--|---------------------------------------|---|---|--|--|--------------------------------------|
| SERIAL NUMBER 10/653,110 | FILING DATE 09/03/2003 RULE | CLASS 119 | GROUP ART UNIT 3643 | ATTORNEY DOCKET NO. 1389.01 | | | | | |
| APPLICANTS David Blain Craft, Crosby, TX; | | | | | | | | | |
| ** CONTINUING DATA ***** | | | | | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 11/24/2003 | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; vertical-align: top;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged Examiner's Signature: <u>Thomas Ruel</u> Initials: _____ </td> <td style="width: 15%; text-align: center; vertical-align: top;"> STATE OR COUNTRY TX </td> <td style="width: 15%; text-align: center; vertical-align: top;"> SHEETS DRAWING 3 </td> <td style="width: 15%; text-align: center; vertical-align: top;"> TOTAL CLAIMS 10 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> INDEPENDENT CLAIMS 1 </td> </tr> </table> | | | | | Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged Examiner's Signature: <u>Thomas Ruel</u> Initials: _____ | STATE OR COUNTRY TX | SHEETS DRAWING 3 | TOTAL CLAIMS 10 | INDEPENDENT CLAIMS 1 |
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| ADDRESS MELVIN K. SILVERMAN & ASSOCS., P.C. SUITE 500 500 WEST CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309 | | | | | | | | | |
| TITLE Anti-proof pet food bowl | | | | | | | | | |
| FILING FEE RECEIVED 375 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> </table> | | <input type="checkbox"/> All Fees | <input type="checkbox"/> 1.16 Fees (Filing) | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | <input type="checkbox"/> 1.18 Fees (Issue) | <input type="checkbox"/> Other _____ |
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